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37137 #5222 JU

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REPORTING PERIOD: FROM				· . ·	1	7	το	19 71	wg 1	st	
	(32-37)		142	l a a feet							
PARAMETER :			(3 card only) (38-45)			QUANTITY (46-53)			: 546 1)		
			Mi	NIMUM	1 _	AVE	RAGE	MAX	IMUM	,	JNITS
pH		REPORTED									
	·	PERMIT CONDITION									
Temperature		REPORTED									
		PERMIT	ļ	<u></u>			·			-	
To	tal Suspended Solids	REPORTED	71.6			162.4		299.0		bbu	
		PERMIT						-		-	
		PERMIT	-					<u> </u>		4	
		CONDITION	+		_					-	
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		CONDITION	1							-	001
		REPORTED	1								<u> </u>
		PERMIT CONDITION									. 560
		REPORTED									54 T
		PERMIT CONDITION									
NAME OF	PRINCIPAL EXECUTIV	E OFFICER	4	TI.	TLEOF	THE O	FFICER			DATE	
Reilly		P.		P	ant N		ger		1974		7t
AST	FIRST	MI			1	ITLE		 	YEAR	MO	DAY

INSTRUCTIONS

- Provide dates for period covered by this report in spaces marked "REPORTING PERIOD".
 Enter reported minimum, average and maximum values under "QUANTITY" and "CONCENTRATION" in the units specified for each parameter as appropriate. Do not enter values in boxes containing asterisks. "AVERAGE" is average computed over actual time discharge is operating. "MAXIMUM" and "MINIMUM" are extreme values observed during the reporting period.
 Specify the number of analyzed samples that exceed the maximum and/or minimum as appropriate) permit conditions in the columns labeled "No. Ex." If none, enter "O".
- Specify frequency of analysis for each parameter as No. analyses/No. days. (e.g., "3/7" is equivalent to 3 analyses performed every 7 days.) If continuous enter "CONT."

 5. Specify sample type ("grab" or "___hr. composite") as applicable. If frequency was continuous,
- 6. Appropriate signature is required on bottom of this form.7. Remove carbon and retain copy for your records.
- 8. Fold along dotted lines, staple and mail Original to office specified in permit.

(4 card only)		CONCENT		(62-63)	FREQUENCY	SAMPLE		
NO. EX	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	OF ANALYSIS	TYPE	
	10.5	10.9	11.0			3/7	Grab	
	6		11.0					
	73 ⁰ F	77°F	80 ⁰ F			3/7	Grab	
	-	70 ⁰ F	80°F					
	7.2	8.75	15.8	lbs/day		1/7	8 hour Composite	
	0,5		18.0	lbs/day				
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I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL. EXECUTIVE OFFICER OR AUTHORIZED AGENT

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